

REGION VII AGING SERVICES

Cherry Schmidt, Regional Aging Services Program Administrator

Serving: Burleigh, Morton, Kidder, Grant, McLean, Mercer, Sheridan, Sioux, Emmons, & Oliver Counties



Fall 2006



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AGING SERVICES NEWSLETTER

Please share this newsletter with a friend, co-worker, at your Senior Center, post on a bulletin board, etc. If you wish not to be on the mailing list for the newsletter, please contact **Cherry Schmidt** at **328-8787**. You are welcome to submit any news you may have regarding services and activities that are of interest to seniors in this region. **West Central Human Service Center** makes available all services and assistance without regard to race, color, national origin, religion, age, sex, or handicap, and is subject to Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1975 as amended. **West Central Human Service Center** is an equal opportunity employer.

MISSION STATEMENT

In a leadership role, Aging Services will actively advocate for individual life choices and develop quality services in response to the needs of vulnerable adults, persons with physical disabilities, and an aging society in North Dakota.

*Region VII Newsletter
compiled by WCHSC
Aging Services*

*Layout & design by
Peggy Krein, WCHSC*



Could you benefit from A CapTel™ Phone?

CapTel phones allow the user to **hear** and **see** what someone is saying! **CapTel** phone users can listen to the caller while they read the written captions in the **CapTel** phone's display window.

How does the CapTel Phone work?

When you place a call with a **CapTel** phone, the captioning service is connected automatically to provide captions. You just dial the phone number of the person you want to call, and the call will be captioned.

Behind the scenes, a specially trained operator at the captioning service transcribes everything the other party says into written text, using the very latest in voice-recognition technology. The written text appears on a bright, easy-to-read display window built into the **CapTel** phone. The captions appear almost simultaneously with the spoken word, allowing the **CapTel** phone users to understand everything that is said — either by hearing it or by reading it.



How your family, friends, or employer can call you?

To receive a call, your caller must first dial the toll free number of the captioning service and then enter your phone number. You will get captions through any call that is placed through the captioning service. If your caller dials you directly, the call will not be captioned. "Call Me" cards that list the toll free captioning service number are included with the **CapTel** phone. You can give the "Call Me" cards to people who call you frequently.

How does the CapTel Phone compare to a Voice Carry Over (VCO) Phone?

CapTel phone users can simultaneously hear the voice over the phone and read captions of what is said. Current VCO technology allows only voice or text on the line at one time and does not allow the VCO user to hear the voice of the other party.

Who benefits from a CapTel Phone?

- Anyone with some degree of hearing loss, who finds it difficult to understand telephone conversations.
- People using hearing aids or assistive listening devices.
- People who are deaf or hard-of-hearing and can speak.

Is there a charge for the Captioning Services from Relay North Dakota?

There is no charge for the captioning service; however, when making long distance calls from a **CapTel** phone there is a charge just as there would be if you used a standard telephone. If you want the captioning service to bill the long distance company of your choice, you will need to call them and set that up, just as you would if you used a Text Telephone (TTY) or Voice Carry Over (VCO).

How do I get a CapTel Phone?

The **CapTel** phone is now offered at no cost to eligible participants as part of the North Dakota Telecommunications Equipment Distribution Services (TEDS) which is currently run through the Interagency Program for Assistive Technology (IPAT). To see if you qualify, call IPAT at 1-800-265-4728. The forms for the TEDS program are also available at the IPAT website: www.ndipat.org.

To find out more information regarding CapTel Service, or Relay North Dakota see the following:

- ND Relay website: www.relaynorthdakota.com
- CapTel website: www.captionedtelephone.com

CapTel Customer Service:

CapTel: 1 (888) 269-7477 OR
 1 (800) 482-2424 TTY
En español: 1 (866) 670-9134
By TTY: 1 (800) 482-2424
By FAX: 1 (608) 238-3008
Email:
CapTel@CapTelMail.com

- **ND Relay Phone Number:**
7-1-1



Introducing Rhonda Haugen



Employment & Training Coordinator Bismarck, North Dakota

Serving the following North Dakota counties: Burleigh, Dickey, Emmons, Grant, Kidder, Lamoure, Logan, McIntosh, Morton, Oliver, Sioux, and Stutsman

Experience Works announces the appointment of **Rhonda Haugen** as the Employment & Training Coordinator for a 12-county

area in North Dakota. Rhonda will oversee the Senior Community Service Employment Program (SCSEP) administered by Experience Works.

The SCSEP is a long-standing program that helps to provide training and employment opportunities for people who are 55 and older, unemployed and with limited incomes. Experience Works is a nonprofit charitable organization -- the oldest and largest provider of SCSEP services in the United States. Experience Works has operated for more than 40 years.

Rhonda is one of a team of 15 Employment & Training Coordinators who manage multi-county operations in a three-state region comprised of North Dakota, South Dakota and Minnesota. The primary goal of the Employment & Training Coordinator is to ultimately improve the quality of life of those who participate in training and employment activities.

Rhonda has considerable experience with the nonprofit sector and has done a variety of community-based work. She has a degree in social and behavioral science. Rhonda believes good communication is key to management and successful organizations. She sees her role with Experience Works as

"helping to make a difference." She looks forward to getting to know people participating in training and their host agency representatives.

Contact Rhonda at:

Experience Works
 2204 East Broadway
 Bismarck, ND 58501-4930
 Phone: 701-258-8879
 Fax: 701-258-8874
 E-mail:
rhonda_haugen@experienceworks.org



"I've often felt that public and private endeavor ought to be concentrated upon those who are in the dawn of life, our children; those who are in the twilight of life, our elderly; and those who are in the shadows of life, our handicapped."

*Hubert H. Humphrey
 October 15, 1967*



North Dakota 2006 Forums on Aging

Please note the **enclosed** brochure for the 2006 Forum on Aging. We have a great agenda this year! Susan Raymond will be coming from the Denver Regional Office of the US Administration on Aging. She will provide updates on the trends and future of OAA programs and services.

At 2:30, Peggy Shireley from the IPAT Program will give an overview of Assistive Devices and services provided in that program. She has some very interesting “tools” that help persons to remain independent and just make life easier as we age.

Elinor Ginzler will wrap-up the day with a focus on the role of caregiving. Whether a full-time, part-time or even intermittent caregiver, it is a role most of us will fulfill during our lives.

As you can see, we plan for a very interesting day! Registration is **free** and the brochure indicates the **deadline** to be **September 11th** – if you call after that date we will add names to the list until we are filled to capacity. Please call as soon as you are able and I hope to see you there! Cherry

ND Family Caregiver Support Program



NUTRITION FOR SENIOR YEARS

Good nutrition habits never get old, they do not go south for the winter, and they can never retire. Research has shown that a good diet in later years helps to reduce your risk for chronic disease and helps manage problems you may already have such as high blood pressure (hypertension), high cholesterol, or diabetes.

If you are well-nourished, you will feel better, recover faster from illnesses, spend less time in the hospital, and may be able to live independently longer than those older people who don't eat well.

What are age-related changes that affect nutrition?

Many changes take place as we grow older. These changes are usually just a part of normal aging, are not a sign of illness, and are different just as each person is different. Our senses change. For example, food may taste and smell differently, we may need glasses, and we may find we don't hear as well.

These losses are neither total nor rapid, but they can affect your food and nutritional intake and health status.

Age-related changes that affect eating and nutrition include:

- ⊙ Vision
- ⊙ Hearing
- ⊙ Taste and smell
- ⊙ Thirst
- ⊙ Body composition changes

- ♦ Some loss of vision may give you concerns about cooking, especially using a stove or microwave. Difficulty reading food prices, nutrition labels, or recipes may make grocery shopping, food preparation, and eating very challenging.
- ♦ Loss of hearing may make it more difficult to hear servers in restaurants, at meal sites, or in the grocery store.
- ♦ Changes in senses of smell and taste may make eating more challenging. If food doesn't taste appetizing or smell appealing, we don't want to eat it. Older people have fewer taste buds than younger people. Fewer teeth make it more difficult to chew foods. And if chewing is impaired by dentures, this will also reduce the ability to taste.
- ♦ Thirst sensation may change. The ability to tell if you have had enough fluids will diminish and may put you at risk for dehydration.

As we age, our body composition changes. We lose muscle tissue, body water, and bone mass, and many of us gain body fat. An important change with aging is that most of us need fewer calories (energy) because our metabolism (the rate the body uses energy) slows down. This happens mainly because of the loss of the muscle tissue, but also because physical activity is often reduced. This means that we need to eat fewer calories to maintain the same weight and to keep from gaining excess weight.

However, even though we may need fewer calories as we age, there are other changes that can increase our need for nutrients. For example, the stomach does not produce as many digestive enzymes so digestion is slowed. This means that we may need to take in more nutrients to absorb the same amount as we did when we were younger.

How does this fit with the need for fewer calories? It means that the nutritional quality of your diet must be kept high. Remember, too, that including physical activity is also very important to keeping healthy. Try to get some physical activity at least 5 days every week.



What are important nutrients for seniors?

Several nutrients are of special concern as we grow older: Calcium, Vitamin D, Vitamin B12. Fiber and fluids are also very important parts of our diet.

Calcium is a concern as we age, especially for bone health, but also for its role in heart health and possibly colon cancer. Think about adding another serving of milk, yogurt, or other calcium-rich foods, such as broccoli, kale, mustard greens, pinto beans, salmon and sardines canned with the bone, and soy products like tofu to your daily intake. Fortified orange juice and fortified breakfast cereals can also help. To meet your goal of 1200 milligrams per day, start with at least three servings from the milk group, and add calcium from foods such as vegetables and dry beans.

Vitamin D requirements increase as we age. Sunshine does help the process of making vitamin D in your body, but your skin's ability to produce vitamin D decreases with age. Try to get your face in the sun for 20 minutes each day you are able. Fortified low fat or fat-free milk is an excellent source of vitamin D. Your goal is 400 IU per day if you are between 51 and 70 and 600 IU if you are over 70 years of age. Because vitamin D can be toxic at high levels, speak with your doctor or a dietitian before you take a supplement.

Vitamin B12 is found in animal foods such as milk, yogurt, fish, poultry, and meats, but it's estimated that 10 to 30 percent of older people may have difficulty absorbing it because of decreases in stomach digestive juices. Vitamin B12 is important not only for healthy blood (preventing anemia) but also for proper nerve function. People older than 50 can help meet their vitamin B12 needs by eating foods fortified with B12, such as breakfast cereals. **Before taking a supplement, it is important to talk with your doctor.**

Fiber (the parts of fruits, vegetables and grains that are not digested) not only helps keep you regular, it may also help lower your cholesterol, control blood sugar, and reduce your risk for heart disease and certain cancers. A varied diet of whole grains, such as 100 percent whole-wheat bread, whole-grain muffins or rolls, and brown rice, along with fruits, vegetables, and cooked beans and lentils can help you reach the recommended goal of 20 to 35 grams of dietary fiber every day. Check out nutrition labels to see how much is in different foods. Remember too that drinking enough liquids is important when increasing the fiber you eat.

As we age, we need more **fluids and water**. Drinking too few fluids can lead to dehydration, elevated body temperature, and nausea. Fluids are especially important if you are taking medications. Even though your body may need more water, you may not feel thirsty. Try to drink eight glasses of fluids a day even if you don't feel thirsty. Water is best, but fluids can come from drinking 100% fruit juices, milk, and other beverages, and from foods such as soups and fruit. Decaffeinated beverages are the best choice as those with caffeine may have a slight dehydrating effect. If you do drink regular coffee or tea, do so in moderation. (Source: "The Journey Through Caregiving", North Dakota State University, Fargo, ND. Funding provided through the Older Americans Act and the ND Family Caregiver Support Program.)





Focus on Healthy Eating

Foods from all groups are needed each day for good health, **PLUS** fluid / water.

GRAINS

Make half your grains whole

Eat at least 3 oz. of whole-grain cereals, breads, crackers, rice, or pasta every day.

1 oz. is about 1 slice of bread, about 1 cup of breakfast cereal, or 1/2 cup of cooked rice, cereal, or pasta.

VEGETABLES

Vary your veggies

Eat more dark-green veggies like broccoli, spinach, and other dark leafy greens.

Eat more orange vegetables like carrots and sweet potatoes.

Eat more dry beans and peas like pinto beans, kidney beans, and lentils.

FRUITS

Focus on fruits

Eat a variety of fruit.

Choose fresh, frozen, canned, or dried fruit.

Go easy on fruit juices.

MILK

Get your calcium-rich foods

Go low-fat or fat-free when you choose milk, yogurt, and other milk products.

If you don't or can't consume milk, choose lactose-free products or other calcium sources such as fortified foods and beverages.

MEAT & BEANS

Go lean with protein

Choose low-fat or lean meats and poultry.

Bake it, broil it, or grill it.

Vary your protein routine – choose more fish, beans, peas, nuts, and seeds.

Know the limits on fats, sugars, and salt (sodium)

- Make most of your sources of fat from fish, nuts, and vegetable oils.
- Limit solid fats like butter, margarine, shortening, and lard, as well as foods that contain these.
- Check the Nutrition Facts label to keep saturated fats, trans fats, and sodium low.
- Choose food and beverages low in added sugars. Added sugars contribute calories with few, if any, nutrients.



Source: MyPyramid.gov

COMMUNITY OMBUDSMAN PROGRAM TRAINING AGENDA

TRAINING DATE: **Thursday, October 19, 2006**

TRAINING LOCATION: **North Dakota State Capitol Building, Judicial Wing,
Bismarck, ND 58505, 3rd Floor Conference Room B**

9:00-9:30 REGISTRATION AND COFFEE

9:30-12:00 INTRODUCTION AND GETTING STARTED

History, Purpose and Philosophy

Videotape: ADVOCATES FOR RESIDENTS RIGHTS, The Older
Americans Act Long Term Care Ombudsman Program

North Dakota Century Code Chapter 50-10.1 Long-Term Care
Ombudsman

- Duties and responsibilities of the State Ombudsman,
Regional Ombudsman, and Community Ombudsman

Videotape: LONG-TERM CARE RESIDENTS BILL OF RIGHTS

12:00-1:00 LUNCH

1:00-2:30 COMMUNITY OMBUDSMAN TRAINING

Videotape: BASIC COMPLAINT HANDLING SKILLS FOR
OMBUDSMAN

Discussion of Ombudsman Complaint Case Scenarios

Long-Term Care Ombudsmen Program Policy and Procedure
Manual

Community Ombudsman Position Description

Conflict of Interest and Confidentiality Statement of Understanding

Monthly Reports (Activity Logs)

REIMBURSEMENTS AND WRAP UP



Foot Care Guidelines

When it comes to foot care, prevention and early detection are the names of the game. There are about 82,000 amputations a year, and half of these individuals end up with amputations of their other leg in 3-5 years. The good news is that 45-85% of all amputations can be prevented with a comprehensive foot program. These tips will help you to sidestep infections, cuts, and other breaks in the skin and to notice any problems that do develop early, so that prompt treatment can be given.

What to Do	Why Do It
Keep your blood sugar in target range as much of the time as possible.	To prevent infection, speed healing, and prevent further damage to blood vessels and nerves.
Do NOT smoke.	Carbon monoxide and nicotine impair blood circulation.
Every day, wash your feet with mild soap and warm water; dry carefully. Pay special attention to the areas between toes and around nail beds.	To prevent fungal infections (such as athlete's foot) and other infections.
Inspect your feet carefully every day. Use a mirror if necessary.	To detect any problems such as cuts, blisters, red spots, or swelling early.
Cut toenails straight across and not too short. A 1/16 – 1/8 inch rim of white nail beyond the pink nail bed should be clearly visible all the way across the top of the toenail.	To avoid ingrown toenails and to avoid cutting your toes.
Have a podiatrist trim your nails or utilize a local foot care clinic if you cannot trim them yourself.	
Be more active. Wiggle your toes and rotate your ankles for a few minutes several times a day.	To promote blood flow to your feet.
Never walk anywhere, even indoors, in bare feet or with socks only, especially if feet are numb.	To protect feet from being injured from small or sharp objects and to prevent toes from being stubbed.
Do not soak your feet unless your health-care provider has prescribed this for a particular reason.	Soaking removes natural oils, causing skin to dry and crack. In addition, skin is soft and easily injured immediately following soaking.
If skin on feet is dry, apply lotion to the tops and bottoms.	To prevent skin from cracking.
Do not apply lotion between the toes. (You may apply powder between the toes if desired.)	To prevent fungal infections by keeping the area dry.
Never use commercial corn or callus removers or strong chemical antiseptics. Never perform "home surgery" with sharp cutting tools, and don't use hot water bottles or heating pads on feet.	To prevent burns, cuts, and skin erosion.
Shop for shoes late in the day, when your feet are most swollen, have your foot measured by a professional, and make sure they fit well.	To avoid injuries when "breaking-in" shoes and to prevent chronic rubbing from ill-fitting shoes.

Remember, Medicare and most insurance companies provide benefits for diabetic shoes annually. You do need a physician prescription for this benefit.

Check the insides of shoes daily before putting them on. Use your hand to check for cracks, irregularities, and loose objects.	Any object or rough edge in your shoe can cause blisters or breaks in the skin.
Wear socks that keep your feet dry. Avoid knee-high stockings or socks with tight elastic. Change socks often if your feet perspire heavily. Purchase socks with invisible toe seams or wear them inside out.	Wet feet are a breeding ground for bacteria. Tight socks constrict circulation. Toe seams can cause corns and calluses.
Don't cross your legs when you sit.	To maintain good circulation.
Take off your shoes at every doctor visit.	Your doctor or nurse should check your feet.
Contact your doctor, nurse, or podiatrist immediately when you discover a problem.	Most foot problems are much easier to treat when they are attended to promptly.

"DON'T ATTEND EVERY ARGUMENT YOU'RE INVITED TO."



A cat died and went to Heaven. God met her at the gates and said, "You have been a good cat all these years. Anything you want is yours for the asking." The cat thought for a minute and then said, "All my life I lived on a farm and slept on hard wooden floors. I would like a real fluffy pillow to sleep on." God said, "Say no more." Instantly the cat had a huge fluffy pillow.

A few days later, six mice were killed in an accident and they all went to Heaven together. God met the mice at the gates with the same offer that He made to the cat. The mice said, "Well, we have had to run all of our lives: from cats, dogs, and even people with brooms! If we could just have some little roller skates, we would not have to run again." God answered, "It is done." All the mice had beautiful little roller skates.

About a week later, God decided to check on the cat. He found her sound asleep on her fluffy pillow. God gently awakened the cat and asked, "Is everything okay? How have you been doing? Are you happy?"

The cat replied, "Oh, it is WONDERFUL. I have never been so happy in my life. The pillow is so fluffy, and those little "Meals on Wheels" you have been sending over are delicious!"

Telephone Numbers to Know

Regional Aging Services Program Administrators

Region I:	Karen Quick	1-800-231-7724
Region II:	MariDon Sorum	1-888-470-6968
Region III:	Donna Olson	1-888-607-8610
Region IV:	Patricia Soli	1-888-256-6742
Region V:	Sandy Arends	1-888-342-4900
Region VI:	Russ Sunderland	1-800-260-1310
Region VII:	Cherry Schmidt (local: 328-8787)	1-888-328-2662
Region VIII:	Mark Jesser	1-888-227-7525

Vulnerable Adult Protective Services

Region I & II:	MariDon Sorum	1-888-470-6968
Region III:	Ava Boknecht	1-888-607-8610
Region IV:	Message Line	1-701-795-3176
Region V:	Sandy Arends	1-888-342-4900
Direct referral may be made to Cass County Adult Protective Services unit: 1-701-241-5747.		
Region VI:	Russ Sunderland	1-701-253-6344
Region VII:	Cherry Schmidt or Sheila Lindgren,	1-888-328-2662 or 1-701-328-8888
Region VIII:	Mark Jesser	1-888-227-7525

ND Family Caregiver Coordinators

Region I:	Karen Quick	1-800-231-7724
Region II:	Theresa Flagstad	1-888-470-6968
Region III:	Kim Locker-Helten	1-888-607-8610
Region IV:	Raeann Johnson	1-888-256-6742
Region V:	LeAnne Thomas	1-888-342-4900
Region VI:	CarrieThompson-Widmer	1-800-260-1310
Region VII:	Judy Tschider	1-888-328-2662
Region VIII:	Michelle Sletvold	1-888-227-7525

Long-Term Care Ombudsman Services

State Ombudsman:	Helen Funk	1-800-451-8693
Region I & II:	MariDon Sorum	1-888-470-6968
Region III & IV:	Kim Locker-Helten or Donna Olson (701-665-2200)	OR 1-888-607-8610
Region V & VI:	Bryan Fredrickson	1-888-342-4900
Region VII:	Helen Funk	1-800-451-8693
Region VIII:	Mark Jesser	1-888-227-7525

Other

Aging Services Division and Senior Info Line:	1-800-451-8693
AARP: (1-888-OUR-AARP)	1-888-687-2277
ND Mental Health Association	
(Local):	1-701-255-3692
Help-Line:	1-800-472-2911
IPAT (Assistive Technology):	1-800-265-4728
Legal Services of North Dakota:	
	1-800-634-5263
or (age 60+):	1-866-621-9886
Attorney General's Office of Consumer Protection:	
	1-701-328-3404
	1-800-472-2600
Social Security Administration:	
	1-800-772-1213
Medicare:	1-800-633-4227
Senior Health Insurance Counseling (SHIC)	
ND Insurance Department:	1-701-328-2440
Prescription Connection:	1-888-575-6611



Cherry Schmidt
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